IRC WELCOME CENTER TRAVEL ASSISTANCE FORM

Name:			
Preferred Language:			
Total number of family members:			Name & Age of Family Members (list all):
Travel Information			
Traveling by (Circle One):	Bus	Air	Family pick-up
onfirmation #: Final Destination City:			
Departure Day and Time:			
Arrival Day and Time:			
	Spon	sor contact In	formation
Name:			
City and State:			
Notes:			
Pick up location:	Driv	ver:	Pick-up Time at Shelter:

REMINDERS FOR TRAVEL

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- ♦ Bring IRC Phone
- ♦ Ensure family has food for each day of their journey _____ days journey
- ♦ Ensure family has a bottle of water (and remind them to empty if they are flying)
- ♦ Show the family their route via map & explain any layovers and transfers